

CLAIMS ONLY							SERIAL NO. <div style="font-size: 1.2em; font-family: cursive;">10085539</div>	FILING DATE					
							APPLICANT(S)						
CLAIMS													
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			#		#		#	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1				51						
2			1		1		52						
3			1		1		53						
4			1		1		54						
5			4		2		55						
6			4		3		56						
7			4		2		57						
8			4		1		58						
9			4		1		59						
10	1						60						
11	1						61						
12			1				62						
13	1						63						
14			1				64						
15			1				65						
16			1				66						
17			1				67						
18	1						68						
19			1				69						
20			1				70						
21	1						71						
22			1				72						
23			1				73						
24			1				74						
25			1				75						
26	1						76						
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44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.	7	↓	3	↓	↓	↓	TOTAL IND.	↓	↓	↓	↓	↓	↓
TOTAL DEP.	34	↓	12	↓	↓	↓	TOTAL DEP.	↓	↓	↓	↓	↓	↓
TOTAL CLAIMS	41	↓	15	↓	↓	↓	TOTAL CLAIMS	↓	↓	↓	↓	↓	↓

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

FORM PTO-2822 (1-95)

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